

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE						DDS/OL/PMS-10	
1. TITLE OF REPORT (if a fill-in report include Form No.)						2. TYPE OF REPORT	
# 16 - Contracts Settled						<input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL	
<input checked="" type="checkbox"/>		LOGISTICS		SECURITY		OTHER (specify)	
		MEDICAL		FINANCE			
4. NO. OF COPIES PREPARED		5. FREQUENCY (weekly, monthly, quarterly, etc.)				6. DISTRIBUTION (No. of components not number of copies)	
2		twice yearly				6	
7. FORMAT (memorandum, form computer print-out, etc)		8. ADP PROCESSING			9. DIRECTIVE AUTHORITY REQUIRING REPORT		
computer print-out		<input checked="" type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <input type="checkbox"/> NO 24205			see 13		
10. PREPARING COMPONENT (include lowest level contributing information to report)				11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
OCS - <input type="checkbox"/> PD/CSS; DD/P/CMG; DD/S&T/OEL, ORD; DD/I/NPIC							
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
DISTRIBUTION ONLY							
9	5.38	.25		1.34	2		2.68
B. COSTS OF COMPUTER PRODUCED REPORTS							
	no.pgs	no.cys		per pg			
	58	2		.03	2		6.96
TOTAL COSTS PER YEAR						9.64	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.							
D/L Memo dated 22 Nov. 1967 to D/OCS							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT						ESTIMATED SAVINGS	
<input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						MAN-HOURS DOLLARS STAT	
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION					18. EXTENSION
8 Oct. 1970		Procurement Assistant					<input type="checkbox"/>